UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
DMB Number:	3235-0287			
Estimated average	e burden			
ours per respons	e 0.5			

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Print or Type Responses) 1. Name and Address of Reporting Person * SIMON GARY D (Last) (First) (Middle) 21211 NORDHOFF STREET		2. Issuer Name and Ticker or Trading Symbol CAPSTONE TURBINE Corp [cpst]					5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
			3. Date of Earliest Transaction (Month/Day/Year) 12/01/2016					-	Officer (give title below) Other (specify below)						
(Street) CHATSWORTH, CA 91311			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person						
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqui					Acquir	ired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Yea		Code (Instr. 8)	(A) or I (D)		urities Acquired Disposed of 3, 4 and 5)		5. Amount of Securities Beneficially Owned F Reported Transaction (Instr. 3 and 4)		Following (s)	Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
						Code		Amount (A) or (D) Price		Price	;			or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock		12/01/2016			A		1,389	A	\$ 0.90	80,721			D	
	Report on a s	separate line f	or each class of secu	urities be	eneficially o	owned direc	ctly or	•							
Reminder: indirectly.	Report on a s	separate line f	or each class of secu	arities be	eneficially (Perso conta	ons who	this fo	rm are	not req	uired to re	formation espond unle	ess	EC 1474 (9- 02)
	Report on a s	separate line f	Table II - I	Derivativ		es Acquire	Perso conta the fo	ons who ained in orm dis	this fo plays a f, or Ben	rm are currei	not req	uired to re	spond unl	ess	
	2. Conversion	3. Transactio	Table II - I (an 3A. Deemed Execution Da	Derivative.g., puts	ve Securiti is, calls, wa	es Acquire rrants, opt 5. Number	Perso conta the fo d, Dis tions, 6. Da and I	ons who ained in orm dis sposed o convertinte Exercise Expiratio	this fo plays a f, or Ben ible secu isable in Date	rm are current rities) 7. Ti Amo Unde	not req	uired to red OMB cor	spond unl	f 10. Ownersl Form of Derivati Security Direct (1 or Indirect (1 o	11. Natur of Indirec Beneficia Ownershi (Instr. 4)

Describer Occurs Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SIMON GARY D 21211 NORDHOFF STREET CHATSWORTH, CA 91311	X					

Signatures

Clarice Hovsepian, Power of Attorney for Gary Simon, Reporting Person	12/05/2016
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.